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**FEE TRANSMITTAL  
For FY 2005**

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810).  
Effective on 10/06/2004.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$)** **650.00**

**Complete if Known**

|                      |                       |
|----------------------|-----------------------|
| Application Number   | 10/766,361            |
| Filing Date          | January 28, 2004      |
| First Named Inventor | Dennis G. Griepentrog |
| Examiner Name        | Hae M. Hyeon          |
| Art Unit             | 2839                  |
| Attorney Docket No.  | 335.912               |

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: **50-1170** Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> |                              | <u>SEARCH FEES</u> |                              | <u>EXAMINATION FEES</u> |                              | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
|                         | <u>Fee</u>         | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>         | <u>Small Entity Fee (\$)</u> |                       |
| Utility                 | 300                | 150                          | 500                | 250                          | 200                     | 100                          | _____                 |
| Design                  | 200                | 100                          | 100                | 50                           | 130                     | 65                           | _____                 |
| Plant                   | 200                | 100                          | 300                | 150                          | 160                     | 80                           | _____                 |
| Reissue                 | 300                | 150                          | 500                | 250                          | 600                     | 300                          | _____                 |
| Provisional             | 200                | 100                          | 0                  | 0                            | 0                       | 0                            | _____                 |

**2. EXCESS CLAIM FEES**

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

| <u>Total Claims</u>   |              | <u>Extra</u>       | <u>Claims (\$)</u> | <u>Fee</u>  | <u>Paid</u>   | <u>Multiple Dependent Claims</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> |
|---|--------------|--------------------|--------------------|-------------|---------------|----------------------------------|------------------------------|-----------------|
| 23  | - 20 or HP = | 0                  | x                  | =           | —             | Fee (\$)                         | Fee Paid (\$)                | 50 25           |
| HP = highest number of total claims paid for, if greater than 20      |              |                    |                    |             |               |                                  |                              |                 |
| <u>Indep. Claims</u>  | <u>Extra</u> | <u>Claims (\$)</u> | <u>Fee</u>         | <u>Paid</u> | <u>( \$ )</u> | —                                | —                            | 200 100         |
| 4   | - 3 or HP =  | 1                  | x \$200.00         | = \$200.00  | —             | —                                | —                            | 360 180         |
| HP = highest number of independent claims paid for, if greater than 3 |              |                    |                    |             |               |                                  |                              |                 |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |              |   |                              |                 |               |
|---------------------|--------------|---|------------------------------|-----------------|---------------|
| <u>Total Sheets</u> | <u>Extra</u> | <u>Sheet Number of each additional 50 or fraction thereof</u> | <u>Fee</u>                   | <u>Fee Paid</u> | <u>( \$ )</u> |
| —                   | —            | /50 =   | (round up to a whole number) | x               | =             |

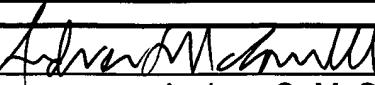
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Two Month Extension of Time

\$450.00

**SUBMITTED BY**

|                   |   |   |                        |
|-------------------|---|---|------------------------|
| Signature         |  | Registration No.<br>(Attorney/Agent) 32,272 | Telephone 414-225-9755 |
| Name (Print/Type) | Andrew S. McConnell   | Date 7/5/05                                 |                        |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |  |                        |                       |
|--|--|------------------------|-----------------------|
| <b>TRANSMITTAL FORM</b>                  |  | Application Number     | 10/766,361            |
|  |  | Filing Date            | January 28, 2004      |
|  |  | First Named Inventor   | Dennis G. Griepentrog |
|  |  | Group Art Unit         | 2839                  |
|  |  | Examiner Name          | Hae M. Hyeon          |
| Total Number of Pages in This Submission |  | Attorney Docket Number | 335.912               |

## ENCLOSURES (check all that apply)

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                                   | <input type="checkbox"/> Assignment Papers<br>(for an Application)        | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input checked="" type="checkbox"/> Fee Attached   | <input type="checkbox"/> Formal Drawings                                  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input checked="" type="checkbox"/> Amendment/Response                                     | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition   | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Extension of Time Request                              | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                          |
| <input type="checkbox"/> Express Abandonment Request                                       | <input type="checkbox"/> Terminal Disclaimer                              |   |
| <input type="checkbox"/> Information Disclosure Statement                                  | <input type="checkbox"/> Request for Refund                               |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                            | <input type="checkbox"/> CD, Number of CD(s)                              |   |
| <input type="checkbox"/> Response to Notification of Missing Requirements Under 35 USC 371 |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53               |   |   |
| DECLARATION and POWER OF ATTORNEY  |   |   |

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name Andrew S. McConnell, Registration No. 32,272  
Boyle, Fredrickson, Newholm, Stein & Gratz, S.C., Customer No.: 23598

Signature

Date 7/5/05

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: July 5, 2005

Type or printed name Dawn M. Oleszak

Signature

Date

July 5, 2005

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